

**IDR-85-G Claim for Credit for Tax Paid****Read this information first**

You must complete **all** steps on this form before we can process your claim for credit. You must also attach to this form a completed, amended return for each period for which you are claiming a credit.

If you have questions, write us at the address at the right or call our Springfield office weekdays between 8:00 a.m. and 4:30 p.m. at 217 524-6551.

Mail your completed claim and amended return to:  
MISCELLANEOUS TAXES DIVISION  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 19019  
SPRINGFIELD IL 62794-9019

**Step 1: Identify your organization**

- 1 Organization's name \_\_\_\_\_
- 2 Address \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
County \_\_\_\_\_
- 3 Date \_\_\_\_\_  
Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_
- 4 License number \_\_\_\_\_
- 5 Daytime telephone number \_\_\_\_\_
- 6 Amount of credit claimed \$ \_\_\_\_\_

**Step 2: Complete the following information**

- 9 Check the tax for which you are filing this claim. (Check only one box.)  
☐ Bingo Tax ☐ Charitable Games Tax ☐ Pull Tabs and Jar Games Tax

- 10 Explain all reasons why you are filing this claim. You may use the back of this form if you need additional space.

- 11 Complete the following table.

a *Date for which overpayment was paid	b Amount of tax paid (If paid under protest, write "P" to the left of the amount.)	c Tax due as corrected	d Subtract Column c from Column b. This is the amount of credit claimed.	Official use only
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____

Total (Write this amount on Step 1, Line 6.)

\$ \_\_\_\_\_

- \* For **Bingo Tax** or **Pull Tabs and Jar Games Tax** claims, write the **quarter and year** (e.g., write "02/1998" for the second quarter of 1998). If you were operating under a limited license for either of these taxes, write the event date (e.g., "03/02/98 - 03-06/98").  
For **Charitable Games Tax** claims, write the **play date** (e.g., write "04/07/1998" for a play date of April 7, 1998).

- 12 Are you a party to any civil suit involving these amounts? ☐ yes ☐ no  
If "yes," write the name of the suit. \_\_\_\_\_

**Step 3: Sign below**

Under penalties provided by law, including a fine, imprisonment, or both, I state that I have examined this claim and, to the best of my knowledge, it is true, correct, and complete. I also state that the information is taken from the books and records of the organization for which this claim is filed.

Claimant's signature

Title (e.g., owner, partner, officer, or authorized agent)

Date